Electronic Paten	t App	olication Fe	e Transmi	ttal				
Application Number:	10	10519230						
Filing Date:	27	27-Feb-2006						
Title of Invention:	Dis	Dismounting device for heavy load hoisting sling						
First Named Inventor/Applicant Name:	Se	Seilchiro Takai						
Filer:	Jul	Jules Edward Goldberg/Julia Watts						
Attorney Docket Number:	JG	JG-SU-5205/500577.20062						
Filed as Large Entity								
U.S. National Stage under 35 USC 371 Filin	ıg Fee	es						
Description		Fee Code	Quantity	Amount	Sub-Total in USD(\$)			
Basic Filing:								
Pages:								
Claims:								
Miscellaneous-Filing:								
Petition:			Adjustment d 12710/2008 I 02 FC:1253	ate: 03/06/2009 NIEFSW 00002249 1110.00 CR	CKHLOK 041679 10519230			
Petition-revive unintent, abandoned appl		1453	1	1620	1620			
Patent-Appeals-and-Interference:								
Post-Allowance-and-Post-Issuance:								
Extension-of-Time:	-,							

س.

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Extension - 3 months with \$0 paid	1253	1	1110	1110
Miscellaneous:				
•	Tot	\$)	2730	

## Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND								
1 Date of Request: 03/02/09 2 Serial/Patent # 10/519,230					10/519,230			
3 Please refund the following f	fee(s):	4 PAP NUM		5 DATE FILED	6 AMOUNT			
Filing					\$			
Amendment					\$			
χ Extension of Time		wfe	е	12/09/08	\$ 1,110.00			
Notice of Appeal/Appeal					\$			
Petition					\$			
Issue	<del></del>				\$			
Cert of Correction/Termin	nal Disc.				\$			
Maintenance					\$			
Assignment					\$			
Other					\$			
			TAL A REFU	MOUNT JND	\$1,110.00			
		8 TO	BE R	EFUNDED 1	BY:			
10 REASON:			Tı	reasury C	heck			
Overpayment		Х	Cı	redit Dep	osit A/C #:			
Duplicate Payment			9 0	4 1	6 7 9			
X No Fee Due (Explanation):								
Submitted after extendable period.								
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: Sherry D. Brinkley TITLE: Petitions Examiner								
SIGNATURE:								
OFFICE: Office of Petitions								
THIS SPACE RESERVED FOR FINANCE USE ONLY:								
APPROVED: KNOK		DATE	:: _	36/0	4			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B